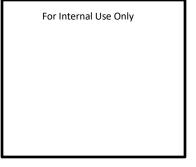


## Village of Muir

VILLAGE CLERK'S OFFICE 122 W SUPERIOR ST. P.O. BOX 205 MUIR, MICHIGAN 48860 PHONE: 989-855-2144 clerk@villageofmuir.com

Website: villageofmuirmi.gov



## VILLAGE OF MUIR COMMERCIAL MARIHUANA ESTABLISHMENT APPLICATION

## ANNUAL AUTHORIZATION APPLICATION FEE: \$5,000 per authorization type (Non-refundable)

## **Application Process**

- Review Village of Muir, Ordinance No. 59, Village of Muir Commercial Marihuana Establishment Ordinance.
- Fully complete and sign this application. (Only applications completed on this form will be accepted).
- Applicant must submit the following:
  - Copies of all documents included in the Entity/Individual Prequalification Application
     Packet provided to LARA (Licensing and Regulatory Affairs).
  - Copies of applications to the state.
  - A business plan.
  - Proof of property ownership or conditional lease agreement.
  - Proof to the Clerk that the applicant has applied for pre-qualification for a state operating license or has submitted full application for such license.
  - Non-refundable Application Fee of \$5,000.
- Once the Clerk receives a complete application including the initial application fee, the application shall be time and date stamped.
- Completed applications shall be considered for authorization in consecutive time and date stamped order. Once the limit on the number of authorizations is reached, then any additional complete applications shall be held in consecutive time and date stamped order for future authorization.
- An authorized applicant shall receive full authorization from the Village of Muir to operate
  the Commercial Marihuana Establishment facility within the Village of Muir upon the
  applicant providing to the Clerk proof that the applicant has received a state operating
  license for the Commercial Marihuana Establishment facility in the Village of Muir and the
  applicant has met all the other requirements of this ordinance for operation.

Type of Authorization	Type of Application	
Grower	No.	ew Application
Micro Business	Renewal Application	
Marihauna Retailer	Li	cense Modification
Applicant Information		
Applicant Name:		Date of Birth
Business Name:		Tax ID#
Phone Number:		Email:
Secondary Phone:		
Physical Address:		
Mailing Address:		
Entity Information		
Applicant Name:		
Business Name:		Tax ID#
Phone Number:		Email:
Secondary Phone:		
Physical Address:		
Mailing Address:		

Proposed facility information (The facility shall only be operated as long as it remains in compliance with all Village of Muir Ordinances and Regulations.)
Name of Proposed Facility:
Address of Drangerd Facility:
Address of Proposed Facility:
Owned Leased
Property Owner Name:
Property Owner Address:
Property Owner Phone:
Parcel Number:
If Leased, Owners Email:
Has your application previously been denied by a municipality?
If yes, where?  Have you ever been convicted of a Felony:
have you ever been convicted of a relong.
Hours of Operation:
Is there an alarm system in place?:
If yes, name of Alarm Company:
Proof of Ownership: Attach document  Written consent of Leasing: Attach document

\*\*\* This Institution is an Equal Opportunity Provider\*\*\*

Additional Contacts and Stakeholders (List all officers, directors, general partners, managing members, stockholders, partners and members) Attach additional stakeholders		
Name:	Address:	
Email:	Phone:	
Title:	Date of Birth:	
Name:	Address:	
Email:	Phone:	
Title:	Date of Birth:	
Name:	Address:	
Email:	Phone:	
Title:	Date of Birth:	
Name:	Address:	
Email:	Phone:	
Title:	Date of Birth:	
Name:	Address:	
Email:	Phone:	
Title:	Date of Birth:	

Oath of Application	
I hereby certify this application and any attachments are true, correct are the best of my knowledge. I also acknowledge that it is my responsibility responsibility of my agents and employees to comply with the provision Regulation and Taxation of Marihuana Act, Initiated Law 1 of 2018, as me and the rules promulgated thereunder and the Village of Muir Ordinance Certify that I have read and understand the Village of Muir Ordinance Normaniana Establishment Ordinance.	and the s of the Michigan ay be amended es. I further
Applicant Signature	Date
Applicant Printed Name	Date

Application processing time is dependent on review and fee processing and could take up to twenty (20) business days.

For Village Clerk Use Only (Conditional Authorization Status) Please check and initial each requirement met by the applicant.		
☐ Conditional Approval		
☐ Denied		
\$5,000 Non-Refundable fee received		
Clerk/Designee Signature: Date:		
Notes:		
For Village Clerk Use Only (Full Authorization Status) Please check and initial each requirement met by the applicant.		
Application materials received:		
☐ Copies of state applications with proof of state receipt		
Business Plan		
Copies of all documents included in The Entity/Individual Prequalification Application Packet provided to LARA(Licensing and Regulatory Affairs.)		
☐ Full Authorization		
☐ Denied		
☐ Cancelled		
☐ Extension		
Clerk/Designee Signature: Date:		
Notes:		